Disclosure Rep Use this form for gen			- faum at	ion manatha a	م المسماد		ing. Wilder V		Yes 🔀 No		
Do not use this form			normat.	ion, must be s	agnea a	ma suoi	mitted along with o	omer (detailed forms.		
1. Committee Inform				[200]		Carrier V D V					
a. Full Name								c.	ID Number		
STRICKLAND FOR	R PINE	HURST			OCT 6) O noar					
b. Mailing Address (incl	ude City	, State and Zip Code)		hdv.	- 001 2	2 3 2015		d. Date Filed			
PO BOX 3871					•				10/23/2015		
PINEHURST, NC 2	28374			MC	XOF	(EE	OE	e.	e. Phone Number		
								910-295-6808			
2. Report Year	3. Peri	iod Start Date (mm/d	d/yy)	4. Period E	1 TERRITOR ALL			III Na	me		
2015		9/23/2015			9/2015		JOHN E. FARR	ELL			
6. Type of Committee	ee (Che	eck One)	9. Tyı	pe of Report	(c	heck on	ly one type of repo	ort fro	m one category)		
Candidate Campa		Party	Munici		,-	State/C			Referendum		
☐ PAC		Referendum		Organizational			Organizational		Organizational		
Independent Joint Fundraiser Expenditure Joint Fundraiser Legal Expense Fund				Thirty-five day			Quarterly	[Pre-referendum		
7. Type of Fund		licable, check one)		Pre-primary		\Box	First	ŀ	Final		
"Booster Fund"	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\boxtimes	Pre-election			Second	Ì	Supplemental Final		
Building Fund				Pre-runoff			Third] [Annual		
				Semi-annual			Fourth	Ī	Special		
_				Mid Year			Semi-annual				
Other:			□	Year End			Mid Year		10. Special Report Name		
			↓ □	Final			Year End				
8. Number of Funda	raisers 0	this Report		Special			Final Special		•		
11. Account Inform			J		11. A	ccount	Information	<u>_</u>			
a. Financial Institution F		ie					titution Full Name				
BANK OF AMERIC	CA										
b. Purpose		c. Account Code			b. Pur	pose			c. Account Code		
OPERATIONS		A	<u> </u>								
		d. Period Begin Balanc	e						d. Period Begin Balance		
		\$ 7,290.81							\$		
CERTIFICATION											
I certify that the Con the NC General State is complete, true and JOHN E. F.	utes an l correc	d that no funds are co t and that I have bee	omming	gled with prob	nibited	or other	r non-disclosed fui	ıds. I	22D-22M of Chapter 163 of further certify that this report 0/22/2015		
		ed Name of Signer			Signature	of Appo	inted Treasurer		Date		
FOR OFFICE USE C	DNLY					_	~ ~		-1: N.fd - 1		
Date Received:		10-23-15	.	Employee:		- 11	16	<u>[</u>	<u>elivery Method</u> Normal Mail		
Date Postmarked: E				Employee:				<u> </u>	Registered Mail Hand Delivered		
Date Scanned:				Employee:					Electronically Filed Signer has not received		
Date Data Enter	red:	*************************************	a.	Employee:		derline paper			mandatory training		
Please Note: Th	is form						as the committee ant information.	ddres	s, treasurer, assistant treasurer,		

CRO-1000

MCORL COUNTY DUMB CONTAMENT

Use this form to summarize all disclosure reporting forms and to total monetary information.

Nο

1. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number Pre Election STRICKLAND FOR PINEHURST Total this Total this 2015 **Start of Election Cycle:** January 1, Reporting Period **Election Cycle** \$ Cash on Hand at Start 7,290.81 .00 RECEIPTS **Aggregated Contributions from Individuals** (CRO-1205) 555.00 \$ 555.00 5) 7,425.60 \$ 18,817.86 (CRO-1210) \$ Contributions from Individuals 6) \$ **Contributions from Political Party Committees** (CRO-1220) 7) \$ **Contributions from Other Political Committees** 8) (CRO-1230) (CRO-1410) \$ \$ 9) Loan Proceeds \$ Refunds/Reimbursements To the Committee (CRO-1240) 10) 11) Other Receipt Sources 0.06 \$ 0.13 11a) Interest on Bank Accounts (CRO-1250) \$ 11b) Contributions from Not-for-Profit Organizations \$ (CRO-1250) \$ \$ 11c) Outside Sources of Income (CRO-1250) 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$ \$ 11 e) Exempt Purchase Price Sales (CRO-1265) \$ \$ 7,980.66 19,372.99 **TOTAL RECEIPTS** (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) EXPENDITURES AND BUREAU COM 建物 医高温温 医电子电子多数 13) Disbursements 7,950.28 \$ 9,674.54 \$ 13a) Operating Expenditures (CRO-1310) \$ 13b) Contributions to Candidates/Political Committees \$ (CRO-1310) \$ \$ 13c) Coordinated Party Expenditures (CRO-1310) \$ \$ **Aggregated Non-Media Expenditures** (CRO-1315) 14) \$ Loan Repayments (CRO-1420) \$ 15) \$ \$ Refunds/Reimbursements From the Committee (CRO-1320) 16) \$ 2,325.60 \$ 4,702.86 17) In-Kind Contributions (CRO-1510) \$ 10,275.88 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 14,377.40 \$ 4995.59 4,995.59 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) ADDITIONAL INFORMATION Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 20) \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) 22) Debts and Obligations owed By the Committee (CRO-1610) \$ 23) **Debts and Obligations owed To the Committee** (CRO-1620) \$ **Account Transfers Within the Committee** \$ 24) (CRO-1720) \$ \$ 25) Administrative Support (CRO-1710) \$ \$ (CRO-1440) 26) Forgiven Loans \$ \$ 27) 48-Hour Notice Reports Sum (CRO-2200) \$ \$ 28) Contributions to be Refunded (CRO-1215)

MANNY CONNTY PUBLIC CONV

Aggregated Contributions from Individuals

Page

of

Amendment
Yes

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171

Optional form used to report NC Contributions From Individuals of \$50 or less

	nittee Full Na	2.]	ID Num	ber					
Strickla	nd For Pinehu	rst							
									
3. Cont	ributor Inform				1 2				
a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. A	mount		
	Add Remove	A	Check		9/23/2015	\$	50.00		
	Add	A	Check		9/25/2015	\$	50.00		
	Remove	A	CHECK		7/25/2013				
	Add Remove	A	Check		9/28/2015	\$	30.00		
	Add	A	Check		10/2/2015	\$	50.00		
	Remove								
<u> </u>	Add Remove	A	Check		10/2/2015	\$	25.00		
	Add								
H	Remove	A	Check		10/5/2015	\$	50.00		
	Add	A	Check		10/7/2015		50.00		
<u> </u>	Remove						, <u></u>		
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	Add	A	Check		10/14/2015	, ,	50.00		
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	Add	A	Check		10/15/2015	5 :	25.00		
<u> </u>	Remove Add	_							
	Remove	- A	Check		10/15/201:	5	\$ 25.00		
	Add	A	Check		10/15/201	5	\$ 50.00		
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	Remove	- A	Check		10/16/201	5	\$ 50.00		
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旹	Add	-					\$		
	Remove								
4. To	tal only thi	s Page				\$	555.00		
	5. Total of ALL CRO-1205 Pages \$ 555.00								
(This line must be on line 5 of Detailed Summary Page CRO-1100)									

MAGRE COUNTY PUBLIC COPY

Contributions from Individuals

Pg 1 of 13 Yes

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Comm	ittee Full Name (a	and Fund if applicab		2. ID Number					
Strickland	l For Pinehurst								
3. Contri	butor Information	1		Add [Remo	ve			
a. Full Nam	e, Mailing Address &	Phone		b. Job Titl	e/Profession		d. Comments		
(include (city, state, & zip)			Retired					
George N		······································							
_	ondhead Drive S			c. Employer's Name/Specific Field					
Pinehurst,	, NC 28374			Consultant					
							e. Election Sun	n to Date	
						•	\$ 500.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	tion	j. Date (mm/dd/yyy	v)	k. Amount	
	A	Check				9/23/201		\$	500.00
								\$	
								\$	
3. Contri	butor Informatio	 n	<u>' </u>	Add	Remo	ove			- :
	ne, Mailing Address &		=		le/Profession		d. Comments		·
	city, state, & zip)			Retired				.	
Thomas F									
645 Diam	ondhead Drive S			c. Employ	er's Name/Spec	ific Field			
Pinehurst	, NC 28374			Business Executive					
							e. Election Su	m to Date	
							\$	100.00	
f, Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Descrip	otion	j. Date (mm/dd/yy	уу)	k. Amount	
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			<u> </u>					\$	
	ibutor Informatio			Add	Rem	ove			<u> </u>
1	ne, Mailing Address é	& Phone		1	tle/Profession		d. Comments	i	· <u> </u>
	city, state, & zip)			Retired	l				
John Wel									
PO Box 4					yer's Name/Spe	cific Field			
Pinehursi	t, NC 28374			Busine	ss Executive				
							e. Election S	um to Date	
	,						\$	100.00	
f, Prior	g. Account Code	h. Form of Payment	i. In-	Kind Descri	ption	j. Date (mm/dd/y	ууу)	k. Amount	
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								\$	
								\$	
	l only this Pag						\$		700.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				90)			\$		7,425.60

Contributions from Individuals

MODE COUNTY PUBLIC COPY

Amendment

Yes 🖂

N

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Commi	ittee Full Name (a	and Fund if applicat	le)				2. ID Numbe	r	
Strickland	For Pinehurst	d.							
3. Contril	butor Informatio	n		Add	Remo	ve			
	e, Mailing Address &	Phone		b. Job Title/Pi	rofession		d. Comments		
	city, state, & zip)			Retired					
Claire Ma									
	Abbey Drive			c. Employer's		fic Field			
Pinehurst,	NC 28374			Homemaker					
			-2			H	e. Election Sum to Date		
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description		j. Date (mm/dd/yyyy	y) k. Amount		
	A	Check				9/23/201	5	\$	100.00
								\$	
				***************************************				\$	*
3. Contri	butor Informatio	n		Add	Remo	ove			
a. Full Nam	e, Mailing Address &	k Phone		b. Job Title/P	rofession		d. Comments		
	city, state, & zip)			Retired					
Helen Mo									
_	Garden Way			c. Employer's		cific Field			
Charlesto	Charleston, SC 29412				Homemaker				
							e. Election Sur	m to Date	
							\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descriptio	n	j. Date (mm/dd/yyy	/y)	k. Amount	
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2000	ne, Mailing Address	& Phone		b. Job Title/	Profession		d. Comments		
	city, state, & zip)	West 2014		Owner					
Frank Qu					. N. /0	.e. 17. 13			
AND AND RESERVED TO SERVED STREET, STR	h Bethesda Rd Pines, NC 29387			c. Employer Quis Inc.	's Name/Spe	ecilic Field			
Somema	Filles, NC 29367			Quis nic.			e. Election Su	ım to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Lind Descripti	on	j. Date (mm/dd/yy	/yy)	k. Amount	
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4. Tota	l only this Pag	ge				<u> </u>	\$	-	450.00
	I of ALL CRO	D-1210 Pages f Detailed Summary Page	cRO-11	00)			\$		7,425.60

MORE COUNT PIPIC COPY Amendment

Contributions from Individuals

Contri	dutions from	i individuais		Pg	<u>3</u> of	13_	Yes	⊠ No
Use this fo	orm to report indiv	ridual contributions or	ver \$50	or contributions under				• • • • • • • • • • • • • • • • • • • •
1. Comm	ittee Full Name (a	and Fund if applicab	le)			2. ID Numb	er	
Strickland	l For Pinehurst							
3. Contri	butor Informatio	n		Add Rem	ove			
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	city, state, & zip)			Securities Trader				
William E								
	Verdra Drive		1	c. Employer's Name/Spe	ecific Field			
Pinehurst	, NC 28374			Finance	}-	TD 41 0	4 75 .	
						e. Election Su	m to Date	
						\$	200.00	
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	city, state, & zip)			Retired				
Barbara S	_							
15 Oxton				c. Employer's Name/Sp	ecific Field			
Pinehurst	Pinehurst, NC 28374			Homemaker		. 17145 0	4. Th. 4	
						e. Election S	um to Date	*-
ı						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Cind Description	j. Date (mm/dd/yy	уу)	k. Amount	
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							\$	
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	city, state, & zip)			Retired				
Alton P.						_		
55 Shaw				c. Employer's Name/S	pecific Field	-		
Pinehurs	st, NC 28374			Finance		a Flootion I	Sum 4- Date	
						\$	225.00	
					·			
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	A	Check			9/29/	/20 	\$	150.00
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-	al only this Pag					\$		475.00
5. Tota	al of ALL CRO	D-1210 Pages				•		7 125 60

(This line must be on line 6 of Detailed Summary Page CRO-1100)

MOORE COUNTY PUBLIC COPY

Amendment

Yes

No

Contributions from Individuals Pg 4 of 13

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) Strickland For Pinehurst Add Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments Doctor (include city, state, & zip) T. Arthur Edgerton c. Employer's Name/Specific Field 1 Royal Dornoch Lane Medical Pinehurst, NC 28374 e. Election Sum to Date 250.00 i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment 10/1/2015 \$ 250.00 Α Check \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Robert Wilson c. Employer's Name/Specific Field 455 Lake Forest Drive SW Pinehurst, NC 28374 Lawyer e. Election Sum to Date \$ 250.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount 10/1/2015 \$ 250.00 Α Check \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Linda Donnelly c. Employer's Name/Specific Field 73 Deerwood Lane Pinehurst, NC 28374 Homemaker e. Election Sum to Date \$ 210.83 i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment 9/29/2015 \$ 210.83 In-Kind Meet & Greet \$ \$ \$ 710.83 4. Total only this Page 5. Total of ALL CRO-1210 Pages \$ 7,425.60 (This line must be on line 6 of Detailed Summary Page CRO-1100)

CRO-1210

NC State Board of Elections

April 2007

ROOM COUNTY PERIS COPY

Amendment

No

Contributions from Individuals

Use this fo	orm to report indiv	idual contributions o	ver \$50 c	or contributions	s under				
1. Commi	ittee Full Name (a	ınd Fund if applicab	le)				2. ID Numb	er	
Strickland	For Pinehurst				_				
3. Contril	butor Informatio	Ω		Add	Remo				
	e, Mailing Address &	Phone		b. Job Title/Prof	ession		d. Comments		
	city, state, & zip)	 		Retired					
	luenighoff		}	c. Employer's Name/Specific Field					
	Forest Drive NC 28374		}	Homemaker	ине/эрес	inc Feiu			
ещеник,	, NC 26374		ļ	Homemarci		}	e. Election Su	m to Date	
							\$	65.00	
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		In-Kind	Meet	& Greet		9/30/201	5	\$	65.00
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a. Full Nan	ne, Mailing Address &	k Phone		b. Job Title/Pro	fession		d. Comments	· · · · · · · · · · · · · · · · · · ·	
	city, state, & zip)			Retired					
Graham I					, 10				
-	273 Juniper Lake Blvd Pinehurst, NC 28374			c. Employer's Name/Specific Field Lawyer					
Pinehurst, NC 28374				_ L _ *			e. Election S	um to Date	
	·	1				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	\$	100.00	
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	city, state, & zip)			Retired			}		
Mary Piz 170 Palm				c. Employer's	Nome/C-	ecific Field	-		
	t, NC 28374			Consultant	Hantop	ectific Ficia	-		
1 monus	9 110 20017						e. Election	Sum to Date	
							\$	200.00	
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(This li	no must ho an lino ƙ a	f Detailed Summary Paga	. CRO-11	00)					.,,

HOURE COUNTY PUBLIC COPY

Amendment

Contributions from Individuals

		vidual contributions ov		or contributions under				
1. Comm	ittee Full Name (a	and Fund if applicab		2. ID Numb	er			
Strickland	l For Pinehurst							
3. Contri	butor Informatio	n		Add Remo	ove			
a. Full Nam	ie, Mailing Address &	z Phone		b. Job Title/Profession		d. Comments		
	city, state, & zip)	,		Journalist				
William C								
596 S 6 th	St			c. Employer's Name/Spec				
Columbus	s, OH 43206		ļ	Independent				
						e. Election Sur	n to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Aind Description	j. Date (mm/dd/yyy	y)	k. Amount	
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(include	city, state, & zip)			Retired			 =	
Nancy Sn	nith			1		i		
PO Box 1	418			c. Employer's Name/Spe	ecific Field			
Pinehurst	, NC 28374			Real Estate	Į		1	
	•					e. Election Su	m to Date	
r						φ.	211.00	
						\$	211.00	1
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3. Contri	ibutor Informatic)n		Add 🗌 Ren	nove			
a. Full Nan	ne, Mailing Address é	& Phone		b. Job Title/Profession		d. Comments	5	
	city, state, & zip)	· · · · · · · · · · · · · · · · · · ·		Retired				
Steve Leg								
65 Pinew				c. Employer's Name/Sp		_		
Pinehurst	t, NC 28374			Automotive Industr	ry	e. Election S	um to Date	
						\$	500.00	
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(This lin	ie <mark>must be on line</mark> 6 of	Detailed Summary Page	CRO-110	<i>)0)</i>		1		7,123.00

CRO-1210

Amen

Yes 🛛 No

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Use this fo	orm to report indiv	vidual contributions or	ver \$50	or contributions under	r \$50 if form CRO	1205 is not	used	_
1. Comm	ittee Full Name (:	and Fund if applicab	2. ID Num	ber				
Strickland	l For Pinehurst							
3. Contri	butor Informatio	n		Add Rem	ove	-	-	
a. Full Nam	e, Mailing Address &	Phone		b. Job Title/Profession		d. Comments		
	city, state, & zip)			Doctor				
James Cle	•							
	Dornoch Drive			c. Employer's Name/Spe				
Pinehurst	, NC 28374			Medical				
						e. Election St	um to Date	····
			· · · · · · · · · · · · · · · · · · ·			\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yyy	/y)	k. Amount	
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(include	city, state, & zip)			Banker				
Charles R	livers	—						
-	Dornoch Lane			c. Employer's Name/Sp				
Pinehurst	Pinehurst, NC 28374			First Capital Bank		TI 4 0 4 5		
	,					e. Election S	Sum to Date	
						\$	75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	l Kind Description	j. Date (mm/dd/yy	ууу)	k. Amount	 .
	A	Check			10/7/20	015	\$	75.00
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			İ				\$	
3. Contr	ibutor Informati	on		Add 🗌 Re	move			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profession	l	d. Commer	ıts	
(include	city, state, & zip)			Retired				_
Elizabeth								
	ern Hills Place			c. Employer's Name/S	pecific Field	_		
Pinehurs [*]	t, NC 28374			Homemaker				
						e. Election	Sum to Date	
						\$	354.00	<u> </u>
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
		In-Kind	Me	et & Greet	10/7/2	2015	\$	354.00
			-				\$	
							\$	
	l only this Pag	···				\$		929.00
li .	l of ALL CRO)-1210 Pages f Detailed Summary Page	CRO_114	nn:		\$		7,425.60

MINE COUNTY PURIL COPY

Amendment **Contributions from Individuals** Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Strickland For Pinehurst Add Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone Retired (include city, state, & zip) William Callison 840 Lake Forest Drive SE c. Employer's Name/Specific Field Wheeling & Lake Erie RR Pinehurst, NC 28374 e. Election Sum to Date 200.00 \$ h. Form of Payment k. Amount f. Prior g. Account Code i. In-Kind Description j. Date (mm/dd/yyyy) \$ 10/8/205 Α Check 200.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Richard Dixon c. Employer's Name/Specific Field 16 Squire Lane **Business Executive** Pinehurst, NC 28374 e. Election Sum to Date 100.00 i. In-Kind Description k. Amount f. Prior g. Account Code h. Form of Payment j. Date (mm/dd/yyyy) \$ Α 10/8/2015 100.00 Check \$ \$ Add Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Helen Neill c. Employer's Name/Specific Field 130 Lake Hills Rd Homemaker Pinehurst, NC 28374 e. Election Sum to Date 100.00 g. Account Code i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior h. Form of Payment 100.00 Α 10/8/2015 \$ Check \$ \$

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

7,425.60

400.00

\$

\$

MOORE COUNTY PUBLIC COPY Amendment **Contributions from Individuals** П No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Strickland For Pinehurst 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Robert Papp 175 Cherokee Rd c. Employer's Name/Specific Field Pinehurst, NC 28374 Insurance e. Election Sum to Date 184.77 f. Prior g. Account Code b. Form of Payment i. In-Kind Description k. Amount j. Date (mm/dd/yyyy) In-Kind Meet & Greet 10/8/2015 \$ 184.77 \$ \$ Remove 3. Contributor Information Add a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired Timothy Moore 32 Lasswade Drive c. Employer's Name/Specific Field Pinehurst, NC 28374 Government e. Election Sum to Date 200.00 j. Date (mm/dd/yyyy) f. Prior g. Account Code h. Form of Payment i. In-Kind Description k. Amount Α Check 10/10/2015 \$ 200.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Retired W. Thomas Reedy 690 Lake Forest Drive c. Employer's Name/Specific Field Pinehurst, NC 28374 **IBM** e. Election Sum to Date 300.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount \$ In-kind Meet & Greet 10/1/2015 200.00

CRO-1210

Α

4. Total only this Page

5. Total of ALL CRO-1210 Pages

Check

(This line must be on line 6 of Detailed Summary Page CRO-1100)

10/15/2015

\$

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7,425.60

100.00

684.77

Amendment

Contributions from Individuals Yes 🔀 No 10 Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Commi	ttee Full Name (a	2. ID Number							
Strickland	For Pinehurst								
3. Contril	butor Information	l		Add [Remo	ve			
a. Full Nam	e, Mailing Address &	Phone		b. Job Title	/Profession		d. Comments		
(include c	ity, state, & zip)			Retired					
John Nayl	or								
20 Huntin	gton Valley Drive			c. Employe	er's Name/Speci	ific Field			
Pinehurst,	NC 28374			Attorney	,				
							e. Election Sum	to Date	
							\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descript	tion	j. Date (mm/dd/yyy	<i>i</i>)	k. Amount	
	A	Check				10/12/20	15	\$	100.00
	•							\$	
					i			\$	
	butor Informatio			Add	Remo	ove			
a. Fuli Nam	e, Mailing Address &	Phone		b. Job Tit	le/Profession		d. Comments		
	city, state, & zip)			Teacher	•	'			
Phillip Hi	nesley					75-			
	PO Box 1298				er's Name/Spe	cific Field			
Pinehurst	Pinehurst, NC 28374			Mo County Schools					
							e. Election Sur	n to Date	
							\$	200.00	i
f. Prior	g. Account Code	h. Form of Payment	i. In-E	Kind Descrip	otion	j. Date (mm/dd/yy	/y)	k. Amount	
		In-Kind	Mee	t & Greet		10/12/20	015	\$	200.00
								\$	
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	ibutor Informatio			Add	Rem	ove			<u> </u>
	ne, Mailing Address &	k Phone			tle/Profession		d. Comments		
	city, state, & zip)			Owner					
Laurie Ri				<u> </u>					
	Dornoch Drive				yer's Name/Spe				
Pinehurs	t, NC 28374			Laurie	Rich Caterin	g			
							e. Election Su	im to Date	
							\$	365.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Descri	iption	j. Date (mm/dd/yy	ууу)	k. Amount	
		In-Kind	Me	et & Greet	t	10/14/2	015	\$	300.00
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5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)				00)			\$		7,425.60
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Contributions from Individuals of No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number

Strickland	For Pinehurst							
3. Contri	butor Informatio	n		Add Remo	ove			
a. Full Nam	e, Mailing Address &	Phone		b. Job Title/Profession	i	d. Comments	<u>, </u>	
	city, state, & zip)			Retired				
	nzen-Moyle							1
PO Box 1	842			c. Employer's Name/Spe	cific Field			l
Southern 1	Pines, NC 28388			Homemaker				İ
						e. Election Su	m to Date	
						\$	150.00	
						φ 	150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Description	j. Date (mm/dd/yyy	y)	k. Amount	
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							\$	
			<u> </u>				\$	
	butor Informatio			Add 🗌 Rem	iove			
a. Full Nam	ne, Mailing Address &	Phone Phone		b. Job Title/Profession		d. Comment	<u> </u>	
	city, state, & zip)			Retired				-
	irk-Conrad							
35 McQu				c. Employer's Name/Spe	ecific Field	ı		
Pinehurst	, NC 28374			Homemaker		e. Election Sum to Date		
						e. Election S	um to Date	
						\$	75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
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3. Contr	ibutor Informatio	n		Add 🗌 Rer	nove			
a. Fuil Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts	
(include	city, state, & zip)			Retired				_
	Frankckowiak							
	Dornoch Drive			c. Employer's Name/Sp	ecific Field			
Pinehurs	t, NC 28374			Invesco				
						e. Election	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In	-Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	A	Check			10/15/2	2015	\$	100.00
							\$	
						·	\$	
	4. Total only this Page					\$		325.00
1	5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1			Αρ)		\$		7,425.60
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CRO-1210

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•	ntribu	tione	tram	i n	dit:	776117	വര

		n Individuals			Pg	<u>12</u> of	13	Yes	⊠ No
	···· - · · · · · · · · · · · · · · · ·	idual contributions ov		or contributio	ns under	\$50 if form CRO			
1. Commi	ittee Full Name (a	and Fund if applicabl	le)				2. ID Numb	er	
Strickland	For Pinehurst								
3. Contri	butor Informatio	n		Add [Remo	ve			
a. Full Nam	e, Mailing Address &	Phone		b. Job Title/Pro	ofession		d. Comments		
	city, state, & zip)			Retired					
Gay Frank							-1		1
	Dornoch Drive			c. Employer's Homemaker		ific Field	-		
Pinenursi,	, NC 28374			нощешаке	ľ		e. Election Su	m to Date	———— <u>—</u>
			ļ						
							\$	100.00	1
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	1	j. Date (mm/dd/y	(yy)	k. Amount	
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3. Contri	butor Informatio	ים		Add 🗌	Rem	ove			
a. Fuil Nam	ne, Mailing Address &	k Phone		b. Job Title/P	rofession		d. Comments	<u> </u>	_1-,
(include	city, state, & zip)			Auditor					<u>-</u> .
Carol Hig	-	÷					_		
25 El Do				c. Employer's		cific Field	_		
Pinehurst	, NC 28374			BOA - Fina	ance				
				}			e. Election S	um to Date	
							\$	125.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	1	j. Date (mm/dd/	уууу)	k. Amount	
		In-Kind	Mee	et & Greet		10/16/	2015	\$	125.00
								\$	
								\$	
	ibutor Informatio			Add 🗌	Ren	nove		·	
•	ne, Mailing Address	& Phone		b. Job Title/I	Profession		d. Commen	ts	
	city, state, & zip)			Retired					
Marilyn				F	- NI/O-				
	onald Rd W t, NC 28374			c. Employer' Federal Ju		eeme Field	_		
Finentia	i, NC 20374			Poderary	idiciai y		e. Election	Sum to Date	
							\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i, In-	Kind Description	n	j. Date (mm/dd	/ /yyyy)	k. Amoun	t
	A	Check				10/16	5/2015	\$	200.00
								\$	
								\$	
4. Tota	l only this Pag	ge					\$		425.00
5. Tota	d of ALL CRO)-1210 Pages					\$		7,425.60
/Thie lis		f Detailed Summary Page	CRO-11	00)			,		,,

MUDIE COUNTY POOLIS COPY

No

C_{ℓ}	ntribu	tions :	from l	[nd	ivi	dnal	le
	,,,,,,,,,,,						4.7

		idual contributions ov		or commodu	mons under				
1. Commi	ittee Full Name (a	and Fund if applicab	le)				2. ID Numb	er	
Strickland	For Pinehurst		_						
3. Contril	butor Information	0		Add [Rem	ove			
a. Full Nam	e, Mailing Address &	Phone		b. Job Title	/Profession		d. Comments		
	city, state, & zip)			Retired					
John Rum			ļ						
103 Gross].		r's Name/Spe	cific Field			
Southern !	Pines, NC 28237			Business	Executive	}	. El . 4 C	_ 4- D	
							e. Election Su	in to Date	
			ļ				\$	100.00	
f, Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descript	ion	j. Date (mm/dd/yy)	/y)	k. Amount	
	A	Check				10/16/20)15	\$	100.00
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3. Contri	butor Informatio	n		Add	Ren	nove			
a. Full Nan	ne, Mailing Address &	t Phone		b. Job Titl	e/Profession		d. Comments	j	
(include	city, state, & zip)			Retired					
Nancy Ru	ımmery						!		
105 Gros					er's Name/Sp	ecific Field			
Southern	Pines, NC 28237			Homem	aker				
							e. Election Sum to Date		
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-E	kind Descrip	tion	j. Date (mm/dd/yy	уу)	k. Amount	
	A	Check				10/16/2	015	\$	100.00
								\$	-
								\$	
3. Contr	ibutor Informatio	on .		Add	Re	move	-		
a. Full Nai	ne, Mailing Address	& Phone			tle/Profession		d. Commen	ts	
	city, state, & zip)			Retired	ļ		1		
Orlando									
	Forest Drive SW				yer's Name/S	pecific Field	-		
Pinehurs	t, NC 28374			AT&T			a Flaction	Sum to Date	· · · · · ·
							\$	650.00	
f. Prior	g. Account Code	h. Form of Payment	j. In-	Kind Descri	ption	j. Date (mm/dd/y		k. Amount	
		In-Kind		et & Greet		10/17/		\$	350.00
								\$	
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5. Tota	al of ALL CRO)-1210 Pages					\$		7,425.60
(This li	ne must be on line 6 oj	f Detailed Summary Page	CRO-11	00)					

Amendment

T _m	Kin	A Ca	ntrib	outions
ın-	· IN 111		MITIE	2111101118

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.	
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.	

1. Committee Full Name (and Fund if applicable	e)				2	<u> 2. ш N</u>	lumber
Strickland For Pinehurst							
3. Contributor Information Add		Rem	nove				
a. Full Name, Mailing Address & Phone			Type of	Cont	ributor	c. Comn	nents
(include city, state, & zip)		D	Ind	ividi	nai		——————————————————————————————————————
Barbara Simpson		7 [_	ndida	nte		
15 Oxton Circle			Par	rty			
Pinehurst, NC 28374] PA	.C	Ļ		
			Re	feren	dum	d. Elect	ion Sum to Date
] Ot	her R	teceipt Source	\$	50.00
e. Description				£	. Date (mm/dd/yyy)	()	g. Fair Market Amount
Food and Refreshments, Meet & Greet					9/28/2015		\$ 50.00
							\$
							\$
3. Contributor Information Add		Rer	nove				
a. Full Name, Mailing Address & Phone		Ŀ	. Type of	f Cor	ıtributor	e. Com	ments
(include city, state, & zip)			🔲 In	divid	iual		
Linda Donnelly		7 [c	andio	late		
73 Deerwood Lane] [Pa	arty			
Pinehurst, NC 28374		[□ P.	AC	1		
•			□ R	efere	endum	d. Elec	ction Sum to Date
			□ o	ther	Receipt Source	\$	210.83
e. Description					f. Date (mm/dd/yy	уу)	g. Fair Market Amount
Food and Refreshments, Meet & Greet					9/29/2015		\$ 210.83
		-					\$
				+			\$
3. Contributor Information Add	d \sqcap	Re	emove				
a. Full Name, Mailing Address & Phone	<u></u>			of Co	ontributor	c. Co	mments
(include city, state, & zip)					idual		
Barbara Nuenighoff		\exists		Cand	idate	1	
810 Lake Forest Drive				Party	•		
Pinehurst, NC 28374				PAC			
1				Refe	rendum	d. El	ection Sum to Date
				Othe	r Receipt Source	\$	65.00
e. Description					f. Date (mm/dd/y	ууу)	g. Fair Market Amount
Food and Refreshments, Meet & Greet	-				9/30/201	5	\$ 65.00
			-			****	\$
							\$
4. Total only this Page						\$	325.83
5. Total of ALL CRO-1510 Pages					• • • • • • • • • • • • • • • • • • • •		
(This line must be on line 17 of Detailed Summary Page	e CRO-1100)					\$	2,325.60

In-Kind Contributions

		77	Mell.	end See	Amend	ment		
ին էր բայանու P	'g 'g	<u>2</u>	of	<u>4</u>		Yes	\times	No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)			2. ID N	umber
Strickland For Pinehurst				
3. Contributor Information Add	Remove			
a. Full Name, Mailing Address & Phone	b. Type of C	ontributor	c. Comn	ients
(include city, state, & zip)	Indiv			
Nancy Smith	1	idate		
PO Box 1418	Party	,		
Pinehurst, NC 28374	PAC			
	Refe	rendum	d. Electi	on Sum to Date
	Othe	r Receipt Source	\$	211.00
e. Description		f. Date (mm/dd/yyy	y)	g. Fair Market Amount
Food and Refreshments, Meet & Greet		10/3/2015		\$ 211.00
		-		\$
				\$
3. Contributor Information Add	Remove		,	·
a. Full Name, Mailing Address & Phone	b. Type of C	Contributor	c. Com	ments
(include city, state, & zip)	⊠ Indi	vidual		
Elizabeth Heins	Can	didate		
35 Southern Hills	Par	у		
Pinehurst, NC 28374	PA(<u> </u>	
	=	erendum	d. Elec	tion Sum to Date
	Oth	er Receipt Source	\$	354.00
e, Description		f. Date (mm/dd/yy	уу)	g. Fair Market Amount
Food and Refreshments, Meet & Greet		10/7/2015	; 	\$ 354.00
				\$
				\$
3. Contributor Information Add	Remove			·
a. Full Name, Mailing Address & Phone		Contributor	c. Coi	nments
(include city, state, & zip)		lividual		
Robert Papp		ndidate		
175 Cherokee Rd	1	rty		
Pinehurst, NC			1.5	
		eferendum	d. Ele	ection Sum to Date
		her Receipt Source	\$	184.77
e. Description		f. Date (mm/dd/y	ууу)	g. Fair Market Amount
Food and Refreshments, Meet & Greet	·	10/8/201	.5	\$ 184.77
				\$
				\$
4. Total only this Page			\$	749.77
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		DESIGN TO	W G	Åmendment
In-Kind Contributions	I	eg <u>3</u> of	<u>4</u>	Yes No
Use this form to report non-monetary contributions, donations,	goods or servic	es provided to the	e commi	ttee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded	ed within 7 day	S.	2 10 1	Number
1. Committee Full Name (and Fund if applicable) Strickland For Pinehurst	•=	<u></u>	2. ID F	Number
Strickland For Finendist				
3. Contributor Information Add	Remove		L	
a. Full Name, Mailing Address & Phone	b. Type of C	ontributor	c. Com	nents
(include city, state, & zip)		ridual		
Thomas Reedy		lidate		
690 Lake Forest Drive	Party PAC			
Pinehurst, NC 28374		rendum	d Flect	ion Sum to Date
		er Receipt Source		
		a recorpt boulet	\$	300.00
e. Description		f. Date (mm/dd/yy	yy)	g. Fair Market Amount
Food and Refreshments, Meet & Greet		10/10/201	5	\$ 200.00
				-
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				\$
3. Contributor Information Add	Remove			
a. Full Name, Mailing Address & Phone		Contributor	e. Com	ments
(include city, state, & zip)	🔯 Ind	ividual		
Phil Hinesley	=====================================	ndidate	1	
PO Box 1298	Par	•		
Pinehurst, NC 28374		C ferendum	d Elec	ction Sum to Date
	=	ner Receipt Source	\$	200.00
D		f. Date (mm/dd/y		g. Fair Market Amount
e. Description Food and Refreshments, Meet & Greet		 `		
Food and Refreshments, Weet & Greet		10/12/20	15	\$ 200.00
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a. Full Name, Mailing Address & Phone		Contributor	e. Co	mments
(include city, state, & zip)		dividual	-	
Laurie Rich	! ==	andidate		
155 Lake Dornoch Drive Pinehurst, NC 28374	\ <u>=</u>	arty AC	l	
Finentias, NC 20574		eferendum	d. Ele	ection Sum to Date
	1 😑 📑	ther Receipt Source		
		-	\$	365.00
e. Description		f. Date (mm/dd/	уууу)	g. Fair Market Amount
Food and Refreshments, Meet & Greet		10/14/20	015	\$ 300.00
			· · -	\$
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4. Total only this Page

5. Total of ALL CRO-1510 Pages

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700.00

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\$

In-Kind Contributions

MUNIC COST CONT. CONT. Amendment \boxtimes No

Use (RO-1215 if In-Kind Contributions were or will be refunded within 7 da	ıys.

1. Committee Full Name (and Fund if applicable)				2. ID N	lumber
Strickland For Pinehurst					
3. Contributor Information Add	Res	move	<u>-</u>	<u> </u>	
a. Full Name, Mailing Address & Phone		b. Type of C	ontributor	c. Comr	nents
(include city, state, & zip)		Indiv			
Carol Higgins	i	Cano	idate		
25 El Dorado Lane		1			
Pinehurst, NC 28374] [PAC			
		므	rendum	d. Elect	ion Sum to Date
		Othe	r Receipt Source	\$	125.00
e. Description			f. Date (mm/dd/yy	уу)	g. Fair Market Amount
Food and Refreshments, Meet & Greet			10/16/201	5	\$ 125.00
					\$
					\$
3. Contributor Information Add	Re	emove			
a. Full Name, Mailing Address & Phone		b. Type of (Contributor	c. Com	ments
(include city, state, & zip)		⊠ Ind	vidual		
Orlando Ippoliti	7	=	didate		
280 Lake Forest Drive, SW		Par	-		
Pinehurst, NC 28374		PA			4 A 4 P :
	ł	=	erendum	d. Elec	ction Sum to Date
		∐ Off	er Receipt Source	\$	650.00
e. Description			f. Date (mm/dd/y	ууу)	g. Fair Market Amount
Food and Refreshments, Meet & Greet			10/17/20)5	\$ 350.00
					\$
			-		
					\$
3. Contributor Information Add	☐ R	Remove			
a. Full Name, Mailing Address & Phone			Contributor	c. Co	mments
(include city, state, & zip)		4 =	lividual	ļ	
Alton P. Hall Jr			ndidate		
55 Shaw Rd NE Pinehurst, NC 28374		Pz	rty		
FIIIGHUISE, INC 20374		1=	eferendum	d. El	ection Sum to Date
		1 ==	her Receipt Source	\$	225.00
e. Description			f. Date (mm/dd	/yyyy)	g. Fair Market Amount
Food and Refreshments, Meet & Greet			10/19/2	015	\$ 75.00
					\$
					\$
4. Total only this Page			<u>l</u>	\$	550.00
5. Total of ALL CRO-1510 Pages					
(This line must be on line 17 of Detailed Summary Page CRO-1100	0)			\$	2,325.60

Other Receipt Sources

No

Pg of

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

	III Name (and Fund if a FOR PINEHURST	2. 11)	2. 1D Number					
3. Type of Recei	pt Source		se use separate CRO-1250 forms for each type of Receipt Source.) Contributions from Not-for-Profit Organizations Outside Sources of Income					
Interest		_ 		side Sources of Income				
4. Contributor I		∐ Add	Add Remove b. Not-for-Profit Federal ID #					
a. Full Name, Mailin	=		b. Not-for	-Profit Federal ID #	d. Comments Interest			
(include city, state			-		on			
Bank of America			a Outside	Source Explanation	Checking			
7 Village Green Pinehurst, NC 2			c. Outside	Source Explanation	Account			
910-295-5544	20374		-		e. Election Sum to Date			
910-295-5544			1					
					\$ 0.13			
f. Account Code	g. Form of Payment	h. In-Kind Description		i, Date (mm/dd/yyyy)	j. Amount			
A	Acct Credit			10/14/2015	\$ 0.06			
					\$			
4. Contributor	Information	☐ Add		Remove				
a. Full Name, Maili	ng Address & Phone		b. Not-fo	r-Profit Federal ID #	d. Comments			
(include city, stat	e, & zip)							
			<u> </u>		4			
			c. Outsid	le Source Explanation	-[
			ŀ		a Floring Sum to Date			
					e. Election Sum to Date			
					\$			
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount			
					\$			
					\$			
4. Contributor	Information	Add		Remove				
	ing Address & Phone		b. Not-f	or-Profit Federal ID#	d. Comments			
(include city, sta	te, & zip)			<u> </u>				
					_			
			c. Outs	ide Source Explanation	4			
•					e. Election Sum to Date			
					\$			
	The second	L I Visi Description	!	i. Date (mm/dd/yyyy)				
f. Account Code	g. Form of Payment	h. In-Kind Description		1. Date (Intil/GG/yyyy)				
·					\$			
					\$			
5. Total only	this Page				\$ 0.06			
·	LL CRO-1250 Pa	ges						
(This line goes i	(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest) (This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)							
		ary Page CRO-1100 if Outside Sour						

MOON COUNTY PURIC SUPYAmendment

 \boxtimes

No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

	Strickland For Pinehurst							
		. 6	DO TATO C		CD' I			
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)								
Operating Ex	didates/Political Committe			rdinated Party Expenditures				
4. Payee Information			Add	_ _	Remove			
a. Full Name, Mailing Address & Phone			b. Coordinated Commit	tee Nan	ne	d. Comments		
(include city, state, &								
Dr Dons Buttons	T 15 14 140							
3906 Morrow Dr	c. Level Registered (Spe	eity)	O					
Glendale, AZ 85308			Federal	片	County:	Discourse Court Discourse		
800-243-8293			State	<u> </u>	Municipality:	e. Election Sum to Date		
						\$ 318.63		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks		
Α	Debit Card	A	10/6/2015		\$318.63	Palm Cards		
					\$			
4. Payee Inform	ation		Add	\sqcap	Remove			
a. Full Name, Mailin			b. Coordinated Commi	ttee Na		d. Comments		
(include city, state,								
Johnny Os Awar						1		
740 N Sandhills			c. Level Registered (Sp	ecify)		1		
Aberdeen, NC 2			Federal	Π̈́	County:	†		
910-944-7438			State	Ħ	Municipality:	e. Election Sum to Date		
					• • • • • • • • • • • • • • • • • • • •	\$ 291.43		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	y)	j. Amount	k. Required Remarks		
Α.	Dobit Cond	Α.	10/6/2015		\$291.43	Lapel Buttons		
Α	Debit Card	A	10/6/2015		\$291.43			
					\$			
4. Payee Inform	ation		Add		Remove			
<u> </u>	ng Address & Phone		b. Coordinated Committee Name		ame	d. Comments		
(include city, state,								
Muirfield Broad						1		
200 Short Rd	-		c. Level Registered (Specify)					
Southern Pines,	NC 28387		Federal		County:]		
910-692-2107			State		Municipality:	e. Election Sum to Date		
						\$ 856.96		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	уу)	j. Amount	k. Required Remarks		
Α	Debit Card	A	10/13/2015		\$856.96	Radio Ads		
					\$			
5. Total only th	is Page	 			_	\$ 1,467.02		
6. Total of ALI								
	00 if Operating Expenses)		4 7050.00				
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) \$ 7950.28						\$ 7950.28		
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
	les (List detailed ex							
A* - Media	B* - Printing	C* - Fu	ndraising			ther Candidate		
E - Salaries	F* - Equipmen		tical Party			ng Public Office Expenses		
I - Postage	J - Penalties	K* - Of	Office Expenses Q* - Donation to Legal Expense Fund			tion to Legal Expense Fund		
O* - Other * Codes require detailed explanation in required remarks field (k)								
* Codes requi	re detailed explana	tion in required	remarks Held (k)			······································		

Disbursements

MOGRE COUNTY FROM COMPY Amendment Pg 2 of 4 Yes

se this form to report expenditures from the committee for; operating expenses	, contributions to candidate/political
ittees and econdinated party expanditures	

1. Committee Fu	Il Name (and Fund	if applicable)					2. ID Number
Strickland For P							
3. Type of Disbu				1310 forms for each t			
Operating Ex	penses	Contributions to Can		es/Political Committees		ordinate	ed Party Expenditures
4. Payee Inform	ation		Αc		Remove		
a. Full Name, Mailir	g Address & Phone		b. (Coordinated Committee Na	ame	d. Co	omments
(include city, state,	& zip)						
Staples							
290 Turner St			c.l	Level Registered (Specify)			
Southern Pines,	NC 28387		느	Federal	County:	ļ	
910-692-2781			L.	State	Municipality:	e. El	lection Sum to Date
			į			\$	130.13
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount		equired Remarks
Δ.	Debit Card	K		10/12/2015	\$101.86	Off	ice Supplies
A	Debit Calu	K		10/12/2013	\$101.00		
					\$		
			ᆜ	11			
4. Payee Inform				dd 🔲	Remove	٠ د ا	Comments
a. Fuli Name, Maili	-		b.	Coordinated Committee N	ame	a. C	Comments
(include city, state,	& zip)		1				
The Pilot			<u> </u>	Lavel Degistered (Species)		\dashv	
PO Box 58	NIC 10200		C.	Level Registered (Specify) Federal	County:		
Southern Pines,	NC 28388		1	State	Municipality:		Election Sum to Date
910-692-7271			╁┺] State []	ivitalicipality.	C. 1	Section Sum to Date
						\$	6,424.37
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy) j. Amoun		_	Required Remarks
A	Debit Card	A		9/28/2015	\$416.56	Ne	ewspaper Ads
A	Debit Card	A		10/2/2015	\$375.00	No	ewspaper Ads
4. Payee Inform	ation			\dd	Remove		
	ing Address & Phone		_	. Coordinated Committee		d.	Comments
(include city, state,	-		F			_	
The Pilot	· α Δρ)		-				
PO Box 58			c. Level Registered (Specify)			\neg	
Southern Pines	. NC 28388		Federal County:				
910-692-7271	, _ ,		וֹן	State	Municipality:	e.	Election Sum to Date
				······································	• •	\$	6,424.37
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k	. Required Remarks
A	Debit Card	A		10/6/2015	\$1,775.00		Newspaper Ads
A	Debit Card	A		10/8/2015	\$891.25	N	Newspaper Ads
5. Total only the	nis Page			<u> </u>	J	\$	3,559.67
	L CRO-1310 Pages		-			-	
• '	n line 13a of Detailed Su		100 i	if Operating Expenses)			7.050.29
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) \$ 7,950.28						7,930.28	
				f Coordinated Party Expen			
	des (List detailed e				· · ·	'	
A* - Media	B* - Printing	C* - Ft	ındı	aising			Candidate
E - Salaries	F* - Equipmen	nt G - Pol	itica	il Party			ublic Office Expenses
I - Postage J - Penalties K* - Office Expenses				Expenses	Q* - Do	nation 1	to Legal Expense Fund
O* - Other	do4s21-J1	.41 !		moules field (le)			e ·
ı " Codes requ	ire detailed explana	ation in required	rei	marks Heid (K)			

No

Die	hn	rsem	ents
1715	vu	126111	СЦІЗ

MOORE COUNTY PORTO CORA

Amendment

Nο

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

	ll Name (and Fund	if applicable)			2. ID Number
Strickland For Pi			<u> </u>		
3. Type of Disbu	rsement <u>(Pleas</u>		RO-1310 forms for each t		
Operating Ex		Contributions to Cand	didates/Political Committees		ordinated Party Expenditures
4. Payee Informa	ation		Add 🔲	Remove	
a. Fuil Name, Mailing Address & Phone			b. Coordinated Committee Na	ame	d. Comments
(include city, state, &					
The Pilot					1
PO Box 58			c. Level Registered (Specify)		1
Southern Pines, NC 28388			Federal	County:	
910-692-7271		į	State	Municipality:	e. Election Sum to Date
					\$ 6,424.37
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount		k. Required Remarks
				Φ1 77E 00	Newspaper Ads
Α	Debit Card	A	10/16/2015	\$1,775.00	
				\$	
4. Payee Inform	ation		Add	Remove	
a. Full Name, Maili			b. Coordinated Committee N	lame	d. Comments
(include city, state,	=]		
USPS					_
Main Post Offic	e		c. Level Registered (Specify))	
Pinehurst, NC 2	8374		Federal	County:	
910-295-1231			State	Municipality:	e. Election Sum to Date
					\$ 120.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
À	Debit Card	I	10/13/2015	\$19.60	Stamps
				\$	
4. Payee Inforn	ıation		Add	Remove	
	ing Address & Phone		b. Coordinated Committee Name		d. Comments
(include city, state,			1.		
Village Printers			7		
22 Rattlesnake			c. Level Registered (Specify)		
Pinehurst, NC			Federal County:		
910-295-6317			State	Municipality:	e. Election Sum to Date
710-273-0317				·	\$ 148.02
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
A	Debit Card	K	9/28/2015	\$38.33	Thank You Notes Stationary
A	Debit Cards	K	10/9/2015	\$87.54	M&G Invitations
	his Page	<u></u>			\$ 1,920.47
5. Total only the	ns Page L CRO-1310 Pages			<u></u> .	1,4,2,4,1,1
			100 if Operating Expenses)		
			100 if Contrib to Candidates/Po	litical Comm)	\$ 7,950.28
			100 if Coordinated Party Expen		
	des (List detailed e				
A* - Media	B* - Printing		undraising	D - To At	nother Candidate
A* - Media E - Salaries	F* - Equipme		litical Party		ding Public Office Expenses
I - Postage	J - Penalties		ffice Expenses	ation to Legal Expense Fund	
O* - Other			•		
	ire detailed explan	ation in required	l remarks field (k)		

D :~1	h.	146	om.	A 10	46	
Dis	bu	rs	em	en	US	

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fig. 2)

	1. Committee Full Name (and Fund if applicable) 2. ID Number						
Strickland For P							
3. Type of Disbu	rsement (Pleas			1310 forms for each t	pe of Disbursem	ent.)	
Operating Ex		Contributions to Can	didate	es/Political Committees	Со	ordinated Party Expenditures	
4. Payee Informa	ation		Ad	d 🔲	Remove		
a. Full Name, Mailing Address & Phone			b. C	Coordinated Committee N	ame	d. Comments	
(include city, state, & Wooton Graphic							
			c. L	evel Registered (Specify)		1	
22 Rattlesnake Trail			П	Federal	County:	7	
910-295-6317			同	State	Municipality:	e. Election Sum to Date	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						\$ 779.12	
f. Account Code	g. Form of Payment	h. Purpose Code	Т.	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
			7		0410 10	Yard Signs	
A	Debit Card	A		10/13/2015	\$419.12		
				No	\$		
4. Payee Inform	ation		Ac	id	Remove		
a. Full Name, Maili		<u> </u>	_	Coordinated Committee M		d. Comments	
(include city, state,	•						
WEEB Talk Ra			1				
PO Box 1855			c.	Level Registered (Specify)	7	
Southern Pines,	NC 28387			Federal	County:		
Southern I mes,	110 20501		17	State	Municipality:	e. Election Sum to Date	
					·	\$ 584.00	
f. Account Code	g. Form of Payment	h. Purpose Code	1	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1. Account Cour					 	Radio Ads	
Α	Check	A		10/19/2015	\$584.00		
					\$		
. T.	ļ	ļ		11 [Remove		
4. Payee Inform		<u></u>		Add Remove b. Coordinated Committee Name		d. Comments	
	ing Address & Phone		b.	. Coordinated Committee	IVAIIIC	di Commento	
(include city, state,	& zip)	*	4				
			-	T and Desistant d (Cassif		 	
			C.	Level Registered (Specify Federal	County:		
ł				╡ 등		e. Election Sum to Date	
			┞	State	Municipality:	e. Election Sum to Date	
1						\$	
f. Account Code	a Form of Davins 4	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1. Account Code	g. Form of Payment	III I III pose coue		1. Date (mm/du/JJJJ)			
					\$		
					\$		
5. Total only this Page				<u></u>		\$ 1003.12	
6. Total of ALL CRO-1310 Pages				· · · · · · · · · · · · · · · · · · ·			
(This line goes in line 13a of Detailed Summary Page CRO-116				f Operating Expenses)		\$ 7,95028	
		f Contrib to Candidates/Po	litical Comm)	\$ 7,95028			
				f Coordinated Party Exper			
	des (List detailed e						
A* - Media	B* - Printing	C* - Ft	undr	aising		nother Candidate	
E - Salaries F* - Equipment G - Politi-				-	ding Public Office Expenses		
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund							
O* - Other	taa aaa daa aa aa aa aa aa aa aa aa aa aa		1	moulta field (1-)		(e_{ij},e_{ij})	
* Codes requ	ire detailed explan	ation in required	rer	narks neid (k)			